

DOCUMENTATION NEEDED (SR 2-DN)**CHILD CARE & SUPERVISION**

CCW: _____

- ☐ Verification of Residential Child Care Experience
- ☐ Verification of Prior Employment. Full or Part-time.
- ☐ Verification of Education
- ☐ Degree/Transcript
- ☐ Timesheet/Timecard
- ☐ Payroll Register
- ☐ Fingerprints/Association/Live Scan
- ☐ Other (List) _____

SOCIAL WORK

Social Worker: _____

- ☐ Verification of Professional Level
- ☐ Degree/Transcript/Professional License(s)
- ☐ Timesheet/Timecard
- ☐ Payroll Register
- ☐ Proof of Payment
- ☐ Contract
- ☐ Direct Contact Contract, if applicable
- ☐ Fingerprints/Association/Live Scan
- ☐ Other (List) _____

MENTAL HEALTH

Mental Health Professional: _____

- ☐ Verification of Professional Level
- ☐ Professional License(s)
- ☐ Proof of Payment
- ☐ Other (List) _____

SIGNATURE

DATE